

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000142370

Entity Name: DR. WESLEY COWAN, D.M.D., INC.

FILED  
Jan 04, 2007  
Secretary of State

## Current Principal Place of Business:

18534 KINGBIRD DR.  
LUTZ, FL 33558

## New Principal Place of Business:

15415 N. DALE MABRY HWY  
TAMPA, FL 33618

## Current Mailing Address:

18534 KINGBIRD DR.  
LUTZ, FL 33558

## New Mailing Address:

15415 N. DALE MABRY HWY  
TAMPA, FL 33618

FEI Number: 20-3856314

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRICK, KEVIN G ESQ  
1200 W. PLATT ST.  
SUITE 100  
TAMPA, FL 33606 US

## Name and Address of New Registered Agent:

NELSON, SCOTT F CPA  
4890 W. KENNEDY BLVD.  
SUITE 240  
TAMPA, FL 33609 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SCOTT F. NELSON

01/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: COWAN, D.M.D., WESLEY DR  
Address: 18534 KINGBIRD DR.  
City-St-Zip: LUTZ, FL 33558

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: COWAN, D.M.D., WESLEY DR  
Address: 15415 N. DALE MABRY HWY  
City-St-Zip: TAMPA, FL 33618

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WESLEY M. COWAN

DR.

01/04/2007

Electronic Signature of Signing Officer or Director

Date